Kansas Corporation Commission Oil & Gas Conservation Division

WELL COMPLETION FORM
WELL HISTORY – DESCRIPTION OF WELL & LEASE

Form ACO-

September 1999

Form Must Be Typed

Operator: License # _____ 5447 API No. 15 - 067-20348-0001 Name:____ OXY USA Inc. _____ Grant Address: P.O. Box 2528 -____- C - <u>SE</u> Sec<u>9</u> Twp.<u>29</u> S. R<u>36W</u> City/State/Zip: Liberal, KS 67905 1320 feet from S / N (circle one) Line of Section Purchaser: ____ Duke feet from E / W (circle one) Line of Section Operator Contact Person: Kenny Andrews Footages Calculated from Nearest Outside Section Corner: Phone: (620) 629-4200 (circle one) NE SE NW SW Contractor: Name: ______ Best Well Service Lease Name: Hickok A Well #: 2 License: ______ 32564 Field Name: Panoma Wellsite Geologist: N/A Producing Formation: Chase/Council Grove Designate Type of Completion: Elevation: Ground: 3033 Kelly Bushing: 3042 New Well _____ Re-Entry X Workover Total Depth: 3000 Plug Back Total Depth: 2950 ___Oil _____ SWD ____SIOW Temp. Abd. Amount of Surface Pipe Set and Cemented at ______672 feet X Gas ____ ENHR ___ SIGW Multiple Stage Cementing Collar Used? ☐ Yes⊠ No ____ Dry ____ Other (Core, WSW, Expl, Cathodic, etc) If yes, show depth set _____ If Workover/Re-entry: Old Well Info as follows: If Alternate II completion, cement circulated from Operator: ___ feet depth to _____ w/ ____ sx cmt. Well Name: Drilling Fluid Management Plan Original Comp. Date: 08/28/1975 Original Total Depth: 3000 (Data must be collected from the Reserve Pit) Deepening X Re-perf. Conv. To Enhr./SWD Chloride content _____ ppm Fluid volume bbls Plug Back Total Depth Plug Back Dewatering method used Commingled Docket No. Location of fluid disposal if hauled offsite: __ Dual Completion Docket No. _____ Operator Name: _____ __ Other (SWD or Enhr.?) Lease Name: _____ License No.: _____ Docket No. 10/15/2007 06/19/1975 11/01/2007 Quarter ____ Sec. ___ Twp, ___S. R. ___ East Uwest Spud Date or Date Reached TD Completion Date or County: _____ Docket No.: _____ Recompletion Date Recompletion Date INSTRUCTIONS: An original an two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 6702, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTINGTICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge. KCC Office Use Only Signature: Lenal Letter of Confidentiality Attached Title: Production Lead Date January 24, 2008 If Denied, Yes Date: Subscribed and sworn to before me this ___ Wireline Log Received RECEIVED _ Geologist Report Received Notary Public: CANSAS CORPORATION COMMISSION

UIC Distribution

A ANITA PETERSON

Notary Public - State of Kansas

My Appt. Expires October 1, 2009

Date Commission Expires:

CONSERVATION DIVISION

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